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**REVOCATION OF POWER OF
ATTORNEY and
APPOINTMENT OF NEW
POWER OF ATTORNEY**

Application Number	10/617,135
Filing Date	July 10, 2003
First Named Inventor	James E. Broberg
Group Art Unit	Not yet assigned
Examiner Name	Not yet assigned
Attorney Docket Number	Y3.0106

I hereby revoke all previous powers of attorney given in the above-identified application:

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners at Customer Number: ☒ Please change the correspondence address for the above-identified application to:☐ The address associated with
Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Mathew R. P. Perrone, Jr.				
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I am the:

☒ Applicant/Inventor☐ Assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37CFR 3.73(b) is enclosed (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	James E. Broberg
Signature	
Date	SEP 16 2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending on the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**POWER OF ATTORNEY and
CORRESPONDENCE
ADDRESS INDICATION FORM**

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I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:

Name	Registration Number
Mathew R. P. Perrone, Jr.	22,951

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name James E. Broberg

Signature

Date

Telephone 847/526-2136

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